MÉDICATLANTIC

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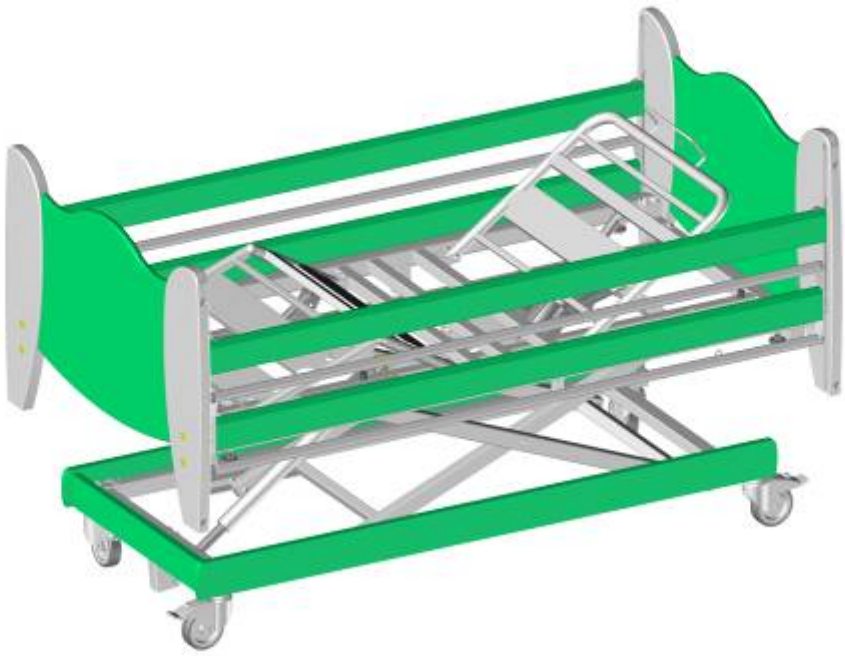
USER MANUAL
PITCHOUNE CHILD'S BED



IPO1L 08 CONTENTS

CE

MUST BE READ PRIOR TO ANY USE
TO BE GIVEN TO THE USER AND KEPT SAFELY

11/10/2010 *580049*

Dear Sir or Madam,

You have just acquired a MEDICATLANTIC medicalised bed with its accessories; we appreciate your confidence.

Our beds and their accessories are designed and manufactured according to the essential requirements applicable under European directive 93/42/EC.

They are tested in conformity with the NF 1970 (2000) standard and its amendment A1 (2005) in their commercial configurations including boards and accessories of our manufacture, in order to guarantee you maximum safety and performance.

The side rails have been tested in conformity with the test method in the cot NF EN 716-1 and 2 standard

Consequently observance of the conditions of use recommended by MEDICATLANTIC and the use of original boards and accessories are requirements for the maintenance of the warranty on the goods in the contract, while ensuring that you use the medicalised bed and its accessories in safety.

① *TRANSPORT CONDITIONS*

WARNING: When handling the mattress support it is essential to strap the back lift and the leg lift to the bed frame.

During transport, the bed should be in the low position, braked, strapped and protected by a cardboard box. The wired control and the electricity supply cable should be attached to the mattress support spacer.

The head and foot boards are protected by cardboard and strapped to the mattress support.

When in its original packaging the bed should be transported upright according to the indications on the packaging (top, bottom and fragile) or flat in certain circumstances (in low spaces). In this case the package cannot be stacked.

- **Package size, upright: L 930. W = 510. H = 2030**.
- **Package size, flat: L 2030. W = 930. H = 510**.

Packages weighing more than 60kg/m² should never be stacked in any position.
Before transporting or dismantling the bed, fix the back lift and the leg lift to the mattress support frame

② *STORAGE CONDITIONS*

The bed, including boards and accessories, should be stored at an ambient temperature between -10°C and +50°C, with relative humidity between 30% and 75 %

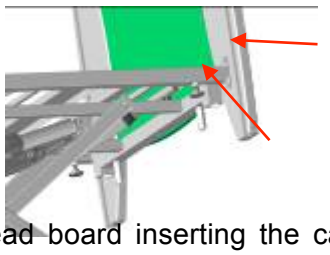
Atmospheric pressure between 700hPa and 1060hPa in the same conditions as for transport.

③ *ASSEMBLY CONDITIONS*

INSTALLATION RECOMMENDATIONS:
These appliances should be installed as follows:
All functions must be tested after installation (test the complete unit and its functions).
Users should be trained in the use of the appliance.
Users (the patient and visitors) should be informed of the safety rules to be observed (cf instructions for use).

3.1 COMMISSIONING

Remove the protective packaging, adhesive tape and packaging strapping. Insert the head board and foot board with weights in the ends of the bed base and lock them with the rondos or screws at the corners of the mattress support.



Hook the wired control to the head board inserting the cable over the cross members as shown in the photo below to prevent pinching.

Position the bed in the room, bearing in mind the operating space required for all functions (variable height) especially if it is fitted with an intravenous post or side rails.

Apply the wheel brakes, check that the electricity mains characteristics are in conformity with the standards in force and correspond with supply box voltage, and then connect the supply cable. Make sure that the supply cable is properly positioned so that it cannot be pinched between the moving parts of the bed. See photo below.

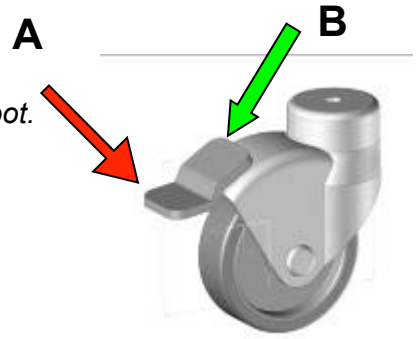
Clip for holding the supply cable

3.2 Locking the wheels:

- **Brakes**

All 4 wheel brakes should be applied when the bed does not need to be moved.

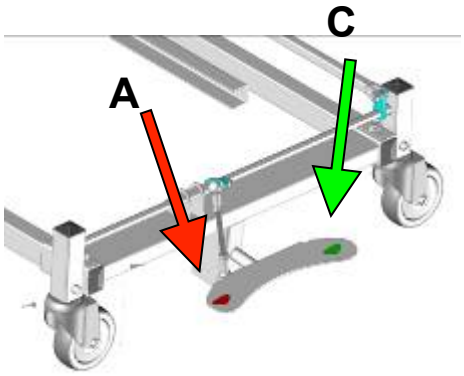
Check that the wheels are locked by trying to move the bed. Failure to observe this rule can result in the patient or a third party falling when steadying themselves on the bed.



A. ***Applying the brakes****: press the brake with your foot.*

B. ***Releasing the brake:*** *press the release lever with your foot.*

- ***Centralised brake control (option)***



A. ***Brakes applied:*** *press the pedal (red side) with your foot.*

B. ***Brakes released****: press the pedal (A or C) with your foot to obtain the middle position.*

C. ***Swivelling wheel:*** *press the pedal (green side) with your foot.*

⚠	Before transporting or dismantling the bed, fix the back lift and the leg lift to the mattress base frame

3.3 ACCESSORY LIST

Article	Reference	C.F.S
Intravenous post	A 165-00	75 Kg
Full length wooden side rails	A 562-00	NA
Folding side rails with cover	A 564-00 / 565-00	NA
Intravenous post	A 17 00	15 Kg
Telescopic intravenous post	A 84 00	15 Kg
Boards for wooden side rails	P 305-00	NA
Boards for folding side rails	P 306-00	NA
Bed skirt for individual wheel brakes	A 563-00	NA
Single foam mattress	A 185-00	NA
Alova mattress	VSPEmouss14 code 84070380 or 84070381	NA

Only accessories and panels distributed by ***MEDICATLANTIC*** guarantee risk-free use.

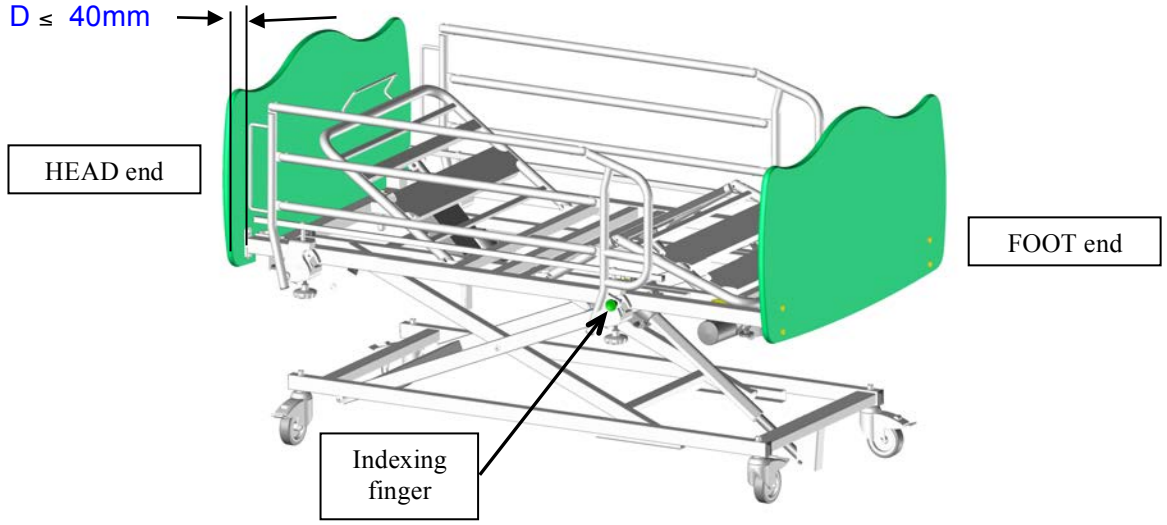
3.4 FITTING THE ACCESSORIES

- **1-Gallows**

The gallows is intended to be used by the patient to lift or reposition himself or herself in the bed. It is not designed to be used to aid transfer.
Insert the gallows into the sockets provided on each side of the head board until the lug notches in.

- **2-Folding side rails**

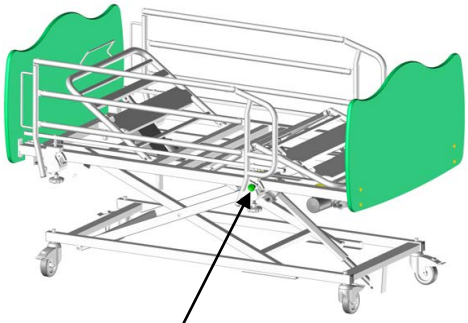
1. Fit the folding side rails in the direction shown in the view
2. Leave a maximum space of 40 mm at the head of the bed.
3. Tighten the rondos of the jaws on the mattress support



Wrong positioning of the side rails and/or absence of the protective cover. Take care to fit the head board at the head of the bed and the foot board at the foot of the bed.

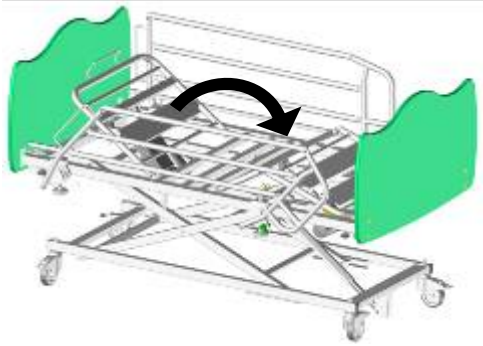
➢ To lower the side rails

1. Take hold of the top rail.



2 Pull on the locking knob.

3



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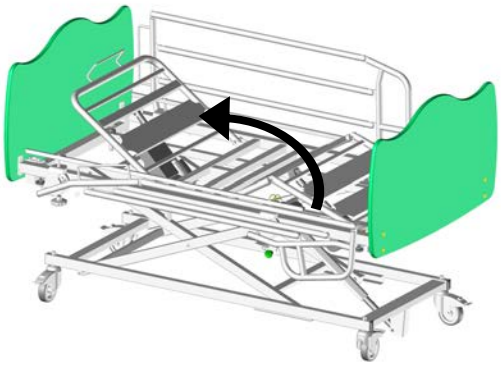
➢ To raise the side rails

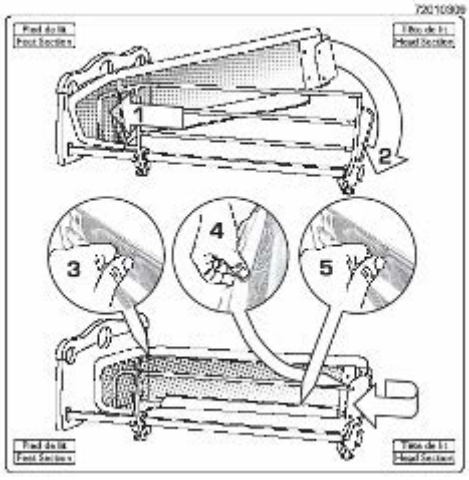
1. Take hold of the top rail and lift.



Check that the side rails are properly locked by trying to fold them without operating the locking plunger

Fit the protective covers by following the instructions below:

Wrong positioning of the side rails and/or absence of the protective cover is detrimental to patient safety and can cause malfunctioning.

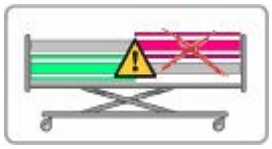


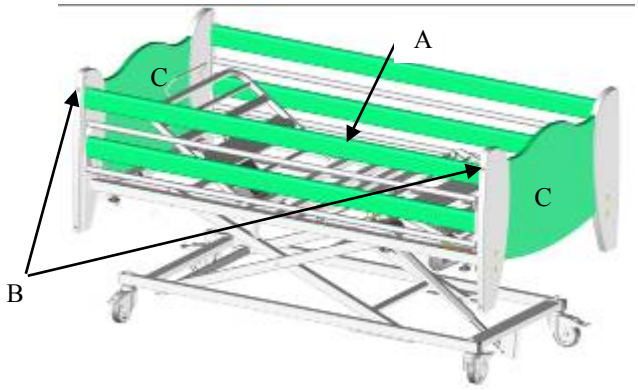
- **3-Wooden side rails**

- To lower the side rails

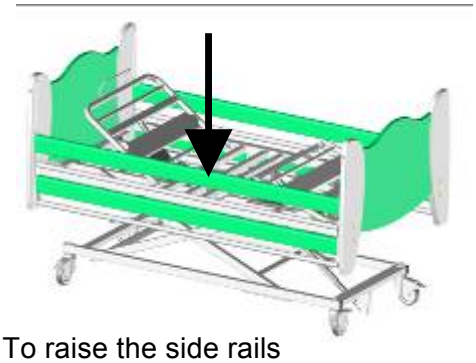
1-Lift the top rail (A) and press the locking buttons (B) for each board (C):

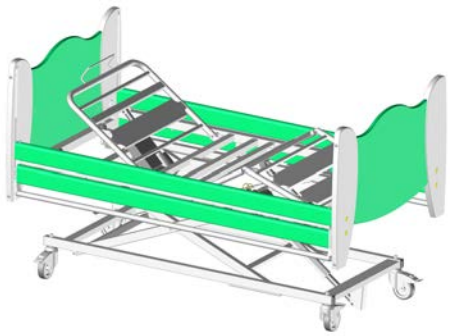
The part consisting of a wood and metal bar is always fitted at the bottom of the side rails.





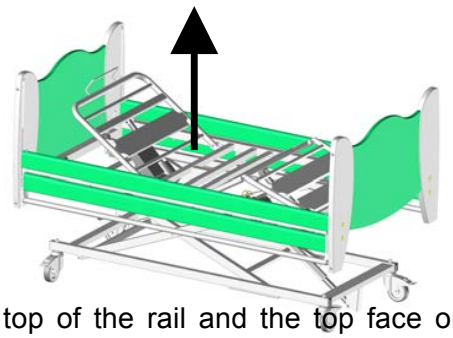
2-Slide the side rails **gently towards the bottom** of the bed **(make sure that no object or part of the patient's body or that of the medical staff is in the operating zone)** until you feel them stopped by the buffer. The top bar rests on the bottom metal/wood bar.





- To raise the side rails

Grasp the top bar and raise it until it locks at the top of the board.
Check that it is properly engaged.



Precaution for use

The distance between the top of the rail and the top face on the uncompressed mattress should be at least 220 mm.

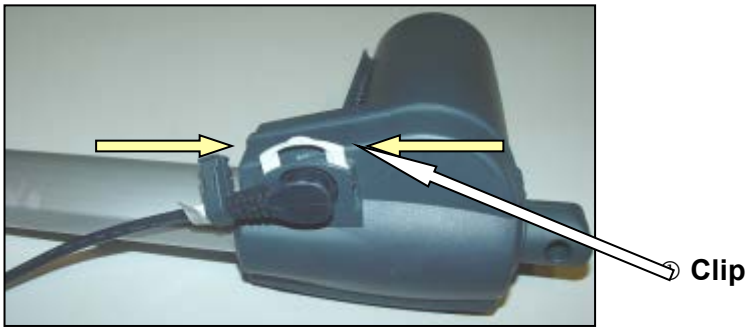
The uncompressed mattress thickness should not exceed 150mm with wooden side rails or 170mm with metal rails.

3.5 MOTOR REMOVAL INSTRUCTIONS

Disconnect the 230 volt plug before dismantling.

- Carry out the dismantling unladen or with the bed in the side position
- If dismantling is done in any other position, fix the moving parts firmly to prevent shearing.
- Disconnect the motor supply wiring, release the motor clips and remove the mounting yokes.

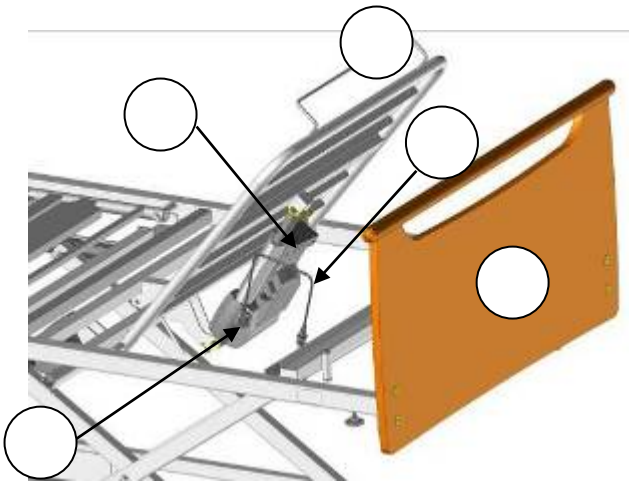
- Refit the motors in the same positions and the same direction as the originals.



3.6 TO LOWER THE BACK LIFT ONTO THE BED

In the event of a breakdown or a power cut, proceed as follows to lower the back lift:

a) Disconnect the power supply plug.
b) Remove the head board① and the wooden side rails if necessary.
c) Position yourself at the head of the bed, and grasp the back lift handle②. Push it or lift it to compensate for the pressure exerted by the patient and with the other hand release the clip③ on the push rod side; the back lift jack will then pivot downwards.
d) Refit the head board.



➢ To change the jack: disconnect the electric wiring to the motor⑤, remove clips ③ and ④.

To lower the back lift in an emergency (option) (can be used in the event of a power cut):

1) Grasp the lift with one hand.
2) With the other hand operate one of the two handles on the back lift and steady the back lift as it goes down.

Releasing the handle stops the back lift movement.

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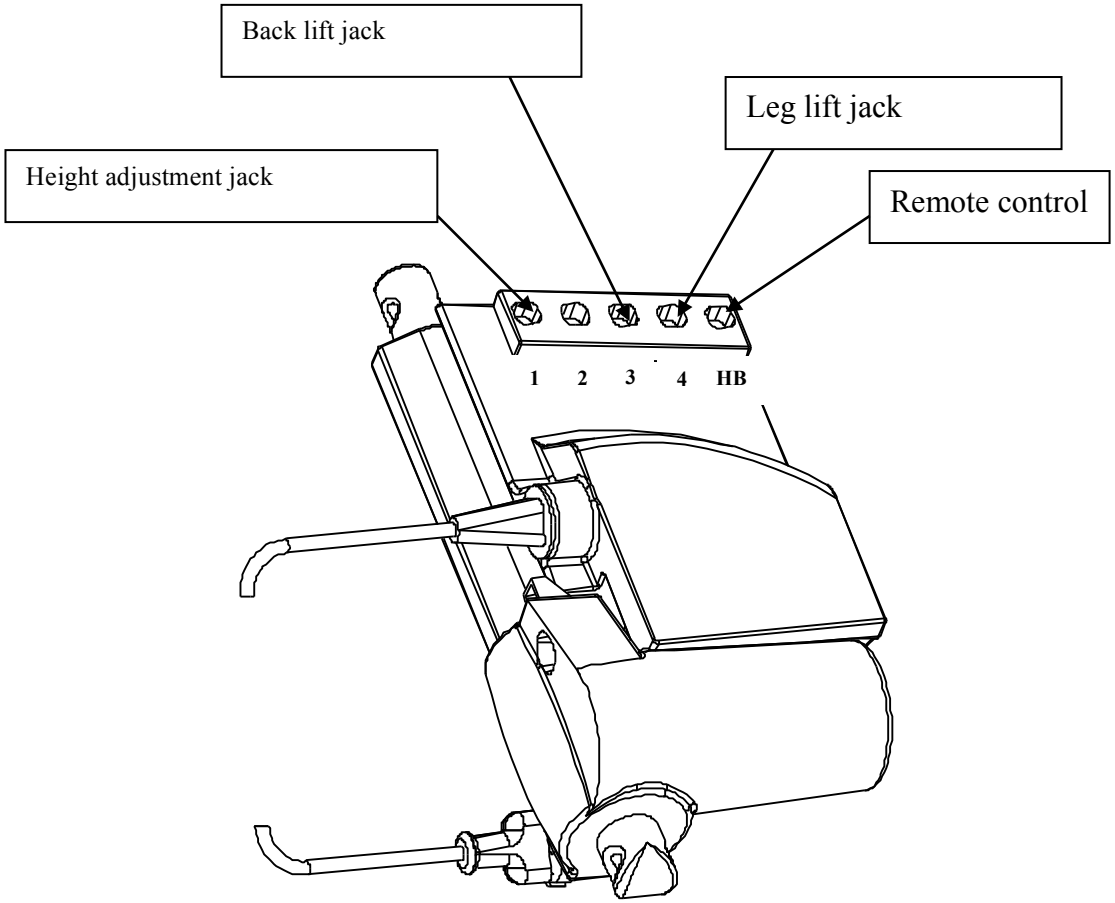
Lowering the back lift in an emergency when the bed is in a very low position (less than 350 mm) may cause slight pinching of the hand.

This emergency function should only be used in an emergency

Release handles

CONNECTION DIAGRAM FOR THE ELECTRICAL COMPONENTS



④ CONDITIONS OF USE

- The appliance must be connected to a dedicated socket. If the use of an adaptor, an extension lead or a multiple plug is unavoidable make sure that its characteristics match those of the appliance.
- Cleaning instructions must be observed.
- The mains supply plug must be disconnected before moving the bed. While the bed is being moved make sure that the cable is not in contact with the floor or the wheels.
- Never pull on the mains cable to disconnect the plug from the power socket.
- When manipulating the appliance, take care not to pinch the motor or remote control wiring and not to form knots.
- Check the condition of the wiring regularly. If the slightest deterioration is observed contact the person in charge of the maintenance of the bed to make the necessary repairs.
- If any technical work is required contact the person in charge of maintenance.

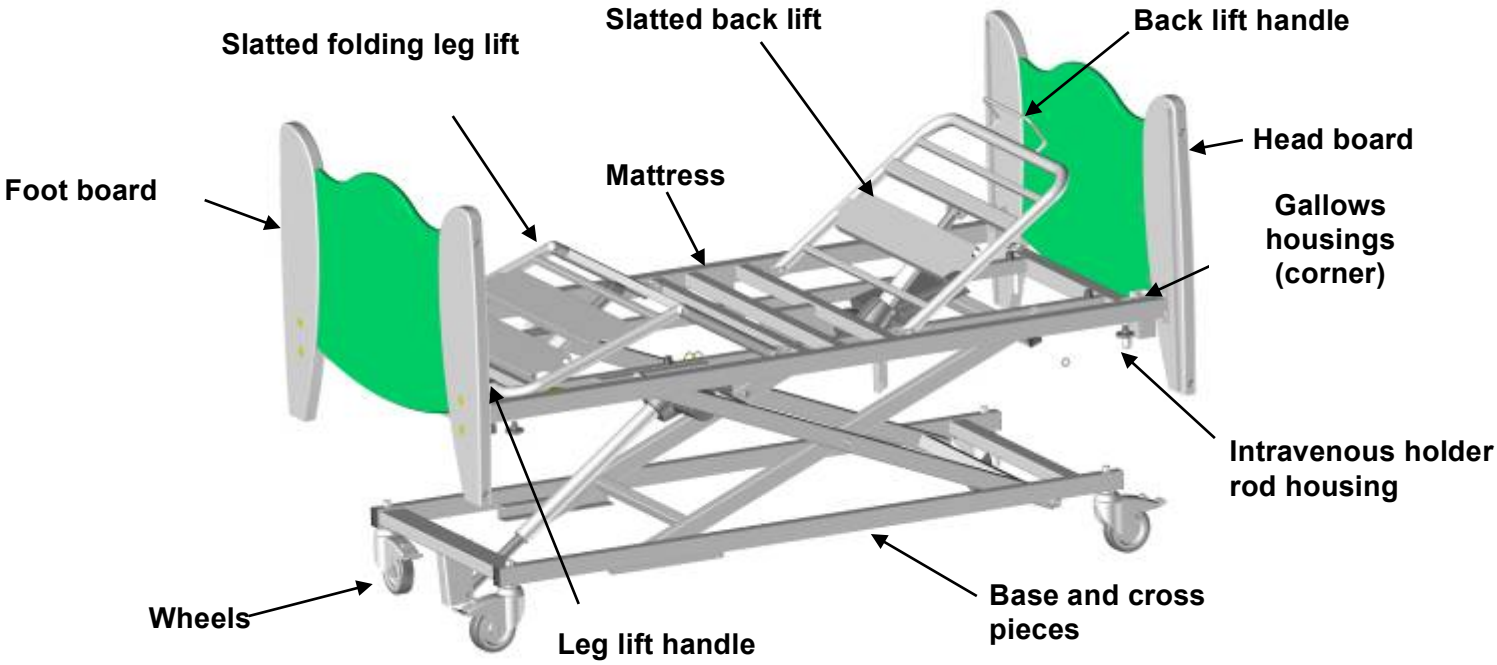
The phone number of the company to be contacted for any work is given in this document.

4.1 PURPOSE OF THE BED

- These beds are intended for children aged 3 to 12 years old (height less than 146 cm) for Home Treatment and in establishments when they are fitted with the emergency back lift lowering option (CPR)

4.2 GENERAL DESCRIPTION

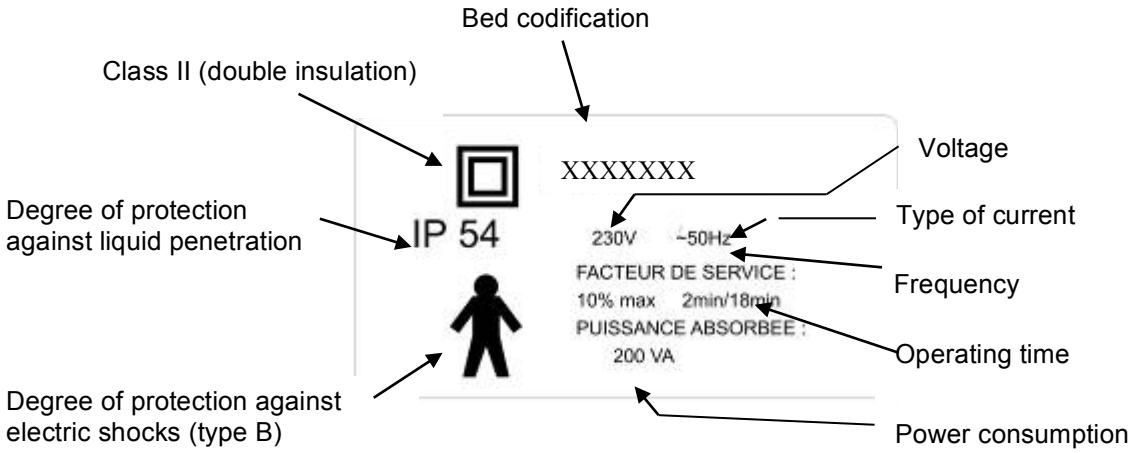
This bed has a head board and foot board. Refer to the price list for the types of board available.



MEDICATLANTIC recommend the use of the XS 150 patient lift.

4.3 TECHNICAL CHARACTERISTICS

- Electrical characteristics



➢ Electrical data

	TYPE	PROTECTION INDEX	VOLTAGE	FREQUENCY
Height adjustment jack	LA 27 6000N	IP 66	24V DC	
Back lift jack	LA 27 6000N	IP 66	24V DC	
Leg lift jack	LA 27 6000N	IP 66	24V DC	
Supply box	CB 6	IP 66	230 V AC	50 HZ
Lockable wired control	HL74	IP 54	24V DC	

Operating time: 2 minutes of continuous use followed by 18 minutes rest

- Mains fuse type and rating F=(1AT)

➢ Noise level

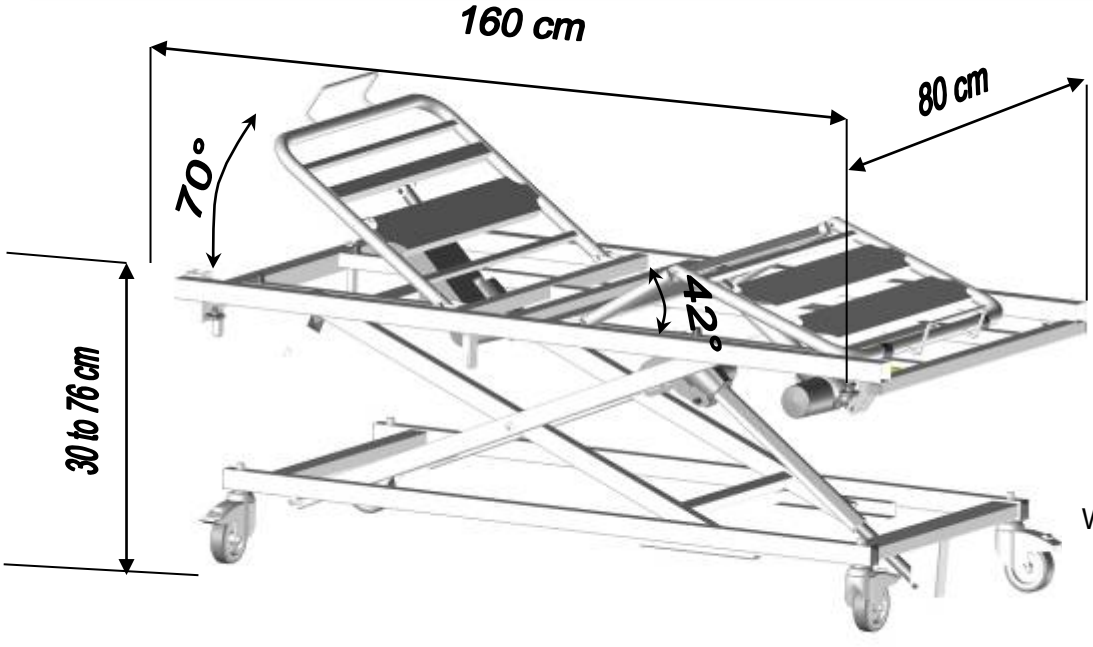
The maximum noise level measured on the bed is 48 dBa.

➢ Weight

- Bed safe working load: 170 kg (Patient 135 kg, Mattress 20kg. Accessories 15kg)
- Gallows safe working load *A1600 - A9300:* 75 kg
- Intravenous post safe working load A1700 - A8400: 8 kg

Bed with electric knee break leg lift (without boards)_____62 kg

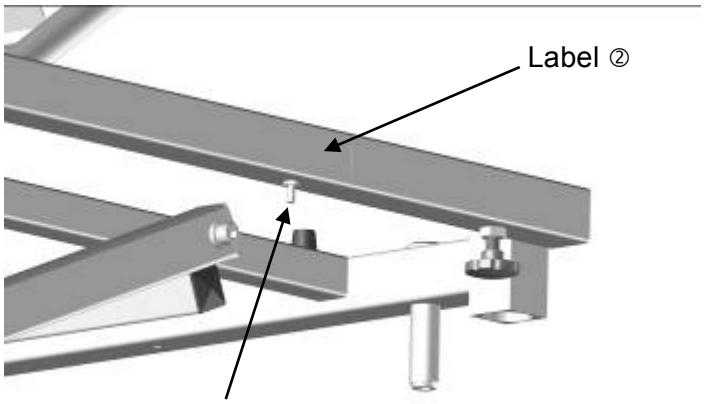
➢ Dimensions



Wheel Ø 100

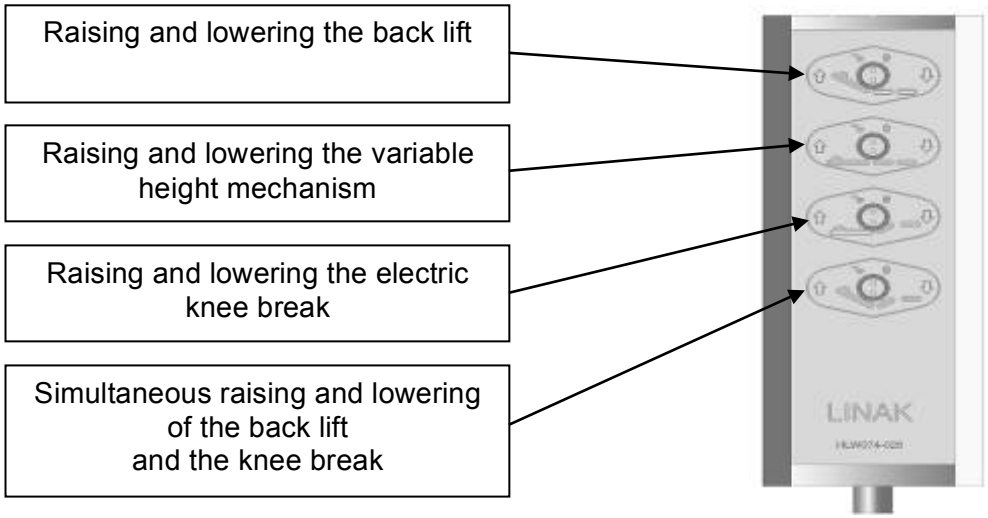
- Equipotential socket

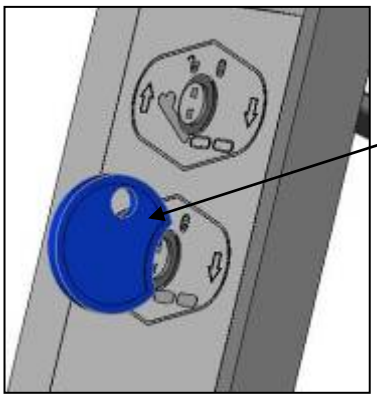
Under the mattress support, at the head end there is an equipotential socket① marked by the label ② to enable you to connect any electromedical appliances you need to use. It is essential that the cables for these appliances pass via the head of the bed and not the sides.



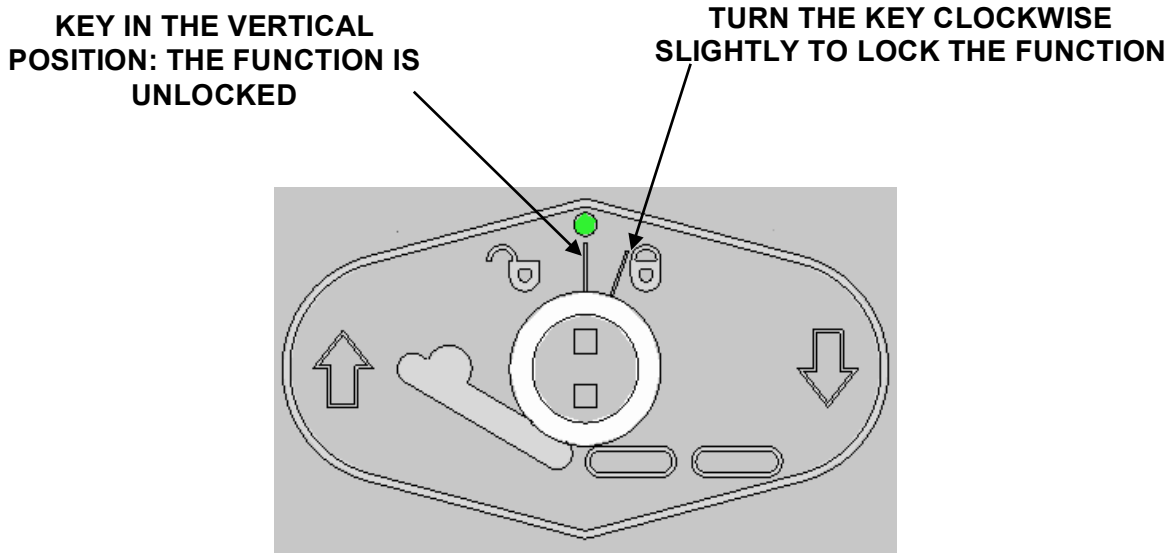
4.4 USE

- Run a test cycle without a patient in the bed to familiarise yourself with the bed's functions.





Key for locking a function (option)



- **Racks**

When raising, lift the knee break with the wire handle at the end
To lower, raise slightly by hand to free the catch and steady the descent with your hand.

4.5 PRECAUTIONS IN USE

Before making any use of the bed it is essential to digest these instructions thoroughly. They contain advice covering use and maintenance to improve your safety. The user or the personnel should be informed about the risks associated with the use of the bed, and prevent very young children from using it.

It conforms to the **E.M.C directive**; however some appliances may affect its operation, in this case move them away or stop using them.

The bed is a medical appliance; consequently it should not be modified in any circumstances. You should ensure its traceability, including that of the boards and the accessories.
If you combine different medical appliances it is your responsibility to make the risk analysis and the **CE** declaration.

Repairs to electrical parts (jacks, supply box, wired control, etc) are only carried out by the manufacturer, Linak.
The bed is an appliance that is unsuitable for use in the presence of a flammable anaesthetic mixture with air, oxygen or nitrous oxide.

After every use, and while treating a patient, it is essential to apply the 4 wheel brakes to immobilise the bed.

The working loads (see bed characteristics) should be uniformly spread over the area of the mattress support.

Do not operate all the motors simultaneously when the bed is loaded (authorisation for one motor at a time).

After every use of the bed and while the patient is resting, it is essential to put the bed in the low position to protect the patient from injury (if the patient's condition requires it: confused, demented or physically weak patients or older children). Remember to lock the wired control (option).
For extra safety, it is possible to fit side rails (see accessories).

Never sit on the side of the back lift or the leg lift unless they are lowered flat.

The bed should only be used for stretcher work if it is fitted with centralised brakes.

When the bed is placed in the low position, make sure that no object or part of the patient's body or of the bodies of medical staff is between the bed, boards, accessories and the floor, between the boards and the base or between the cross pieces

While the bed is being moved make sure that the cable is not in contact with the floor or the wheels.

Provision of the electricity supply

The supply box plug should be connected to an electricity main conforming to the standards in force and corresponding with the operating voltage of 230 V.

The wired control should be hooked to the head board when it is not in use.

During handling of the bed the spiral cable and/or the supply cable must not be in the vicinity of moving parts of the bed such as the cross piece or the back lift, and they should not contain any knots.

Only use original spare parts and accessories distributed by **MEDICATLANTIC** and guaranteeing the safety and maintaining the conformity of the product.

No modification to the bed is allowed.

Abnormal use of the bed may cause damage or accidents for the users; consequently such use would result in cancellation of the warranty. By abnormal use we mean non observance of the precautions for use or maintenance recommendations, or use not connected with the normal function of the bed, such as: use of the bed by several people at the same time, outdoor use, movement of the bed on a slope greater than 10°, etc.

Main performance characteristics

The bed does not make any auto-movement when it is subjected to electromagnetic interference within the limits of the values indicated below.

Manufacturer's guide and declaration - electromagnetic emissions		
The medicalised bed (cf. references in the contents) is designed to be used in the electromagnetic environment specified below. The user should ensure that it is used in this environment		
Emission tests	**Conformity**	**Electromagnetic environment - Guide**
RF emissions CISPR 11	Group 1	The medicalised bed (cf. references in the contents) only uses radio-electrical energy for its internal functions. Consequently its RF emissions are very low and are not likely to cause interference with nearby electronic equipment.
RF emissions CISPR 11	Class B	The medicalised bed (cf. references in the contents) can be used in all domestic premises including those connected directly to the public low voltage mains used to supply premises for domestic use. [ ]
Harmonic emissions EN 61000-3-2	Class A	
Voltage variations / Flicker EN 61000-3-3	Applicable	
RF emissions CISPR 14-1	Conforming	The medicalised bed (cf. references in the contents) is not designed to be connected to any other equipment.

Manufacturer's guide and declaration - electromagnetic immunity			
The medicalised bed (cf. references in the contents) is designed to be used in the electromagnetic environment specified below. The user should ensure that it is used in this environment			
Immunity tests	**CEI 60601 Severity level**	**Conformity level**	**Electromagnetic environment – guide L**
Electrostatic discharges EN 61000-4-2	± 6 kV on Contact ± 8 kV in the air	± 6 kV on contact ± 8 kV in the air	The floor should be wood, concrete or tiles. If the floor is covered with synthetic material, the relative humidity should be at least 30%.
Voltage transients (bursts) EN 61000-4-4	± 2 kV for supply lines ± 1 kV input/output lines	± 2 kV for supply lines ± 1 kV input/output lines	The quality of the mains supply should be that of a typical commercial or hospital environment.
Voltage shocks EN 61000-4-5	Differential mode ± 1 kV Common mode ± 2 kV	Differential mode ± 1 kV /	The quality of the mains supply should be that of a typical commercial or hospital environment.
Sags, short power cuts and supply voltage variation EN 61000-4-11	• <5% U_T – for 10 ms • 40% U_T - for 100 ms • 70% U_T - for 500 ms • <5% U_T - for 5 s	• <5% U_T - for 10 ms • 40% U_T - for 100 ms • 70% U_T - for 500 ms • <5% U_T - for 5 s	The quality of the mains supply should be that of a typical commercial or hospital environment. If the user of the medicalised bed (cf. references in the contents) requires that it continues to operate during interruptions to the mains supply, we advise powering the bed from an inverter or a battery.
Magnetic field at mains frequency (50/60 Hz)	3 A/m	3 A/m	The magnetic field at mains frequency should be at a level characteristic of a typical commercial or hospital environment.
Note: U_T is the nominal value of the voltage applied during the test.			

Manufacturer's guide and declaration - electromagnetic immunity			
The medicalised bed (cf. references in the contents) is designed to be used in the electromagnetic environment specified below. The user should ensure that it is used in this environment			
Immunity tests	**IEC 60601 Severity level**	**Conformity level**	**Electromagnetic environment - Guide**
			Portable and mobile RF communication equipment should not be used at a distance from the

			medicalised bed (cf. references in the contents), including cables, less than the recommended separation distance calculated with formulas applicable according to the transmitter frequency. **Recommended separation distance**
RF conduit EN 61000-4-6	3 Vrms 150 kHz to 80 MHz	3 V	$d = 1.7\sqrt{P}$
Radiated RF EN 61000-4-3	3 V/m 80 MHz to 2.5 GHz	3 V/m 80 to 800 MHz	$d = 1.17\sqrt{P}$ 80 MHz to 800 MHz
			$d = 2.33\sqrt{P}$ 800 MHz to 2.5 GHz
		2 to 2.5 GHz 10 V/m 800 MHz to 2 GHz	where P is the maximum output power of the transmitter in watts (W) assigned by the transmitter manufacturer and *d* the recommended separation distance in metres (m). The field levels emitted by fixed RF transmitters, determined by an electromagnetic measurement of the site [a], should be below the conformity level in each frequency band. Interference may occur in the proximity of appliances carrying the following symbol: 

Note 1 At 80 MHz and 800 MHz, the next higher frequency band applies.

Note 2 It is possible that these recommendations may not apply in all situations. The propagation of electromagnetic waves is modified by absorption and reflexion due to structures, objects and people.

A The field levels of fixed transmitters, such as base stations for radio telephones (cell/wireless) and terrestrial mobile radios, amateur radio, AM, FM and TV radio communication cannot be evaluated accurately theoretically. To obtain the electromagnetic environment caused by fixed RF transmitters, a site measurement must be carried out. If a field level measured in the operating environment of the medicalised bed (cf. references in the contents) exceeds the applicable conformity levels above, the operation of the bed should be checked. If abnormal operation is observed, additional measurements should be taken, such as the reorientation or repositioning of the reference equipment.

B beyond the frequency band of 150 kHz to 80 MHz, the field level should be below 3 V/m

Recommended separation distances between portable and mobile RF communication equipment and the medicalised bed (cf. references in the contents)

The medicalised bed (cf. references in the contents) is designed to be used in an electromagnetic environment in which radiated RF interference is controlled. The user of the bed can help to reduce electromagnetic interference by maintaining a minimum distance between portable and mobile RF communication equipment (transmitters) and the bed as recommended below, according to the maximum output power of the communication equipment.

Maximum assigned transmitter output power **W**	**Separation distance according to the transmitter frequency m**		
	150 kHz to 80 MHz	80 MHz to 800 MHz	800 MHz to 2.5 GHz
	$d = 1.17\sqrt{P}$	$d = 1.17\sqrt{P}$	$d = 2.33\sqrt{P}$
0.01	0.12 / 0.116	0.12 / 0.116	0.23 / 0.233
0.1	0.7 / 0.316	0.37 / 0.366	0.74 / 0.736
1	1.17 / 1.16	1.17 / 1.16	2.33 / 2.33
10	3.70 / 3.66	3.70 / 3.66	7.37 / 7.36
100	11.70 / 11.6	11.70 / 11.6	23.30 / 23.3

For transmitters of which the maximum output power is not listed above, the recommended separation distance ***d*** in metres (m) can be determined using the equation applicable to the transmitter frequency, where ***P*** is the maximum transmitter output power in watts (W) assigned by the transmitter manufacturer.

Note 1 At 80 MHz and 800 MHz, the separation distance given in the next higher frequency band applies.

Note 2 It is possible that these recommendations may not apply in all situations. The propagation of electromagnetic waves is modified by absorption and reflexion due to structures, objects and people.

⑤ *MAINTENANCE CONDITIONS*

The quality control of the beds should be carried out by:

-trained technical or biomedical personnel;
-taking into account the normal conditions of use specified in the instructions for use on a bed fitted with its specific safety rails. The bed should be available for the whole quality control check to be carried out at least once a year, but also:
-in answer to a special request
-after curative maintenance on performance functions that could have been affected by the work done.
However, to save time this operation may be combined with a preventive maintenance service. In this case, it is not necessary to repeat the check on the functions already tested.
With test equipment external to the medicalised bed and compatible with the performance functions claimed;
-By consulting the instructions for use if necessary.

5.1 MAINTENANCE

PREVENTIVE MAINTENANCE RECOMMENDATIONS:
The preventive maintenance should be performed in accordance with our specifications and at least once a year by the body or the person who installed the bed.
The following operations should be carried out between two sessions of use, and at least once a year:
- Inspection of the attachment of the electric wiring along the metal uprights to prevent the wiring being sheared during operation of the height adjustment mechanism.
- Inspection of the condition of all electric wiring and connectors on the appliance.
Replacement if the slightest deterioration is observed (wear, shearing, damage, etc).
- Inspection of the external appearance (especially traces of humidity and good general condition of the protective covers) and the correct operation of the motors and jacks.
- Check on the correct operation of the appliance (test all its functionalities).
- Check on the condition of the frame, the mattress support and the mechanical pivots of the bed.
If the maintenance is done at the patient's home under a long term contract the installer should also:
- Check the installation of the appliance (check that no changes contrary to the safety rules have been made by the user since the installation).
- Remind the users of the safety rules.

-All installation and preventive maintenance operations must be recorded. Cf table model below. This record should be kept in a predetermined place throughout the service life of the appliance.

MEDICALISED BED QUALITY CONTROL

IDENTIFICATION OF THE MEDICALISED APPLIANCE	ESTABLISHMENT
CATEGORY	

MAKE MODEL TYPE	
SERIAL NUMBER	PLACE OF SERVICE
INVENTORY NUMBER	
DATE OF MANUFACTURE	

CHECKED AND CALIBRATED TEST INSTRUMENTS		
Description	Type / model	Identification / serial number
Earth continuity checker		
Dielectrimeter		
Leakage current to the patient		

Qualitative aspects	NA (**1**)	YES	NO
VISUAL CHECKS			
General condition			
Availability of the instructions for use			
Presence of the head board and foot board			
Good general condition (head board and foot board, bed corners and protective buffers)			
General cleanliness			
Corrosion acceptable in view of the requirements of the using department			
Identification / label / silk screen printing condition			
Mechanical condition			
Gallows condition (mounting and strap)			
Good condition of mechanical cables			
Good condition of the sleeping surface (mattress support)			
Locking or tightness of boards (head and foot)			
Correct operation of the bust lift			
Correct operation of the thigh lift			
Correct operation of the half-sitting position			
Correct operation of the manual leg lift			
Correct operation of the knee break			
Correct operation of the mattress support extension			
Correct operation of the wheels (swivelling, rotation, etc) including, if applicable, the steering wheel.			
Correct operation of the bed immobilisation (wheel brakes, etc)			
Check on the tightness of nuts and bolts, pins, pivots, intravenous post, etc			

Qualitative aspects	NA (**1**)	YES	NO
Check on the condition of the welds			

Absence of noise nuisance (squeaking, lubrication)			

Electrical, hydraulic and pneumatic equipment			
Condition of the electrical cables, plugs and connectors (not sheared, pinched, etc)			
Condition of the electrical parts (supply, motors, boxes, etc)			
Condition of the hydraulic and pneumatic parts (pumps, compressors, jacks, shock absorbers, etc)			
Condition of remote controls, displays and indicator lights			

Side rails specific to the bed	NA (**1**)	YES	NO
The side rails installed are the side rails specific to the bed or conforming to the manufacturer's specifications			
Correct position and attachment			
Correct locking of the side rails in the high position			
Check that the height measured from the top of the side rails to the surface of the non compressed mattress (excluding therapeutic mattresses) is 220 mm or more (conforming to the standard in force) **2**			

Safety check		NA (**1**)	YES	NO
Locking of all operational functions				
Inactivation of the height adjustment control pedals				
Cardio Pulmonary Resuscitation (CPR) emergency lowering of the back lift	Check the emergency retraction or removal of the head board			
	Check the operation of the emergency lowering of the bust lift			
Load resistance of the jacks				
Operation of the visual and audible alarms				

Quantitative aspects	NA (**1**)	YES	NO
Bed operation on the battery			
Check on the amplitude of movement			
Maximum angle against the stops = Maximum angle claimed by the manufacturer in the specifications: (± 2°)			
Maximum height = Maximum height claimed by the manufacturer in the specifications (± 20 mm)			
Minimum height = Minimum height claimed by the manufacturer in the specifications (± 20 mm)			

Electrical safety			
Electrical safety check (values in conformity with EN 60601-1)			

Comments

Conclusion	YES	NO
Operational (is the safety of the patient, the medical or the technical personnel put in danger?)		
Action required (cf comments**) 3**		
Recommended date for the next quality check		

OPERATOR			
NAME		Company / Establishment	
DATE		Signature	

1 Not Applicable

2 If the measured height does not conform to the standard, it is necessary to inform the member of the medical management responsible for the application of the prescription. Non conformity is not a criterion of non operationality.

3 The person in charge decides on the action to be taken and the people to contact according to the results of the quality check and the comments made.

5.2 CLEANING AND DISINFECTION

High pressure cleaning is not allowed
Disconnect the power supply cable.

Check that all the electrical parts are connected together. All the connections on the supply box must be used; otherwise this box will not be watertight.

Clean all electrical protection on jacks, the wired control, etc if they have received projections of bodily fluids, especially urine.

Isolate the medical appliance in a disinfection room fitted with a particle filtration system and a drain for wall and floor washing after disinfection.

WIP'ANIOS towelettes - instructions for use

Wipe the surface to be treated carefully. If it is very dirty use a second towelette.

It is not necessary to rinse unless;

- There is subsequent contact with mucosa, OptionButton1
- In the event of contact with non packed foodstuffs.

Qualitative compositions

The impregnation solution of WIP'ANIOS towelettes contains:
.Didecyldimethylammonium chloride,
.Isopropanol, (8%p/p),
.Detergent of the ethoxylated fatty alcohol type.

Physico-chemical properties

Towelette impregnation solutions
5ml per towelette.
Size 200 mm x 200 mm

Microbiological properties

The towelette impregnation solution has a microbic effect
-NF EN 1040 bactericide
-Bactericide in the presence of NF EN 1276 pr EN 13713 interfering substances.
-Bactericide by the germ carrier method: NF T 72190 (spectrum 4).
-Active against Mycobacterium tuberculosis (BK).
-Active against Candida albicans: NF EN 1275.
-Fungicide in the presence of proteins: NF EN 1650
-Active against the herpes virus and the Rota virus
Leave disinfected equipment to dry and protect it from other non disinfected equipment with film and mark with a label showing the disinfection date.

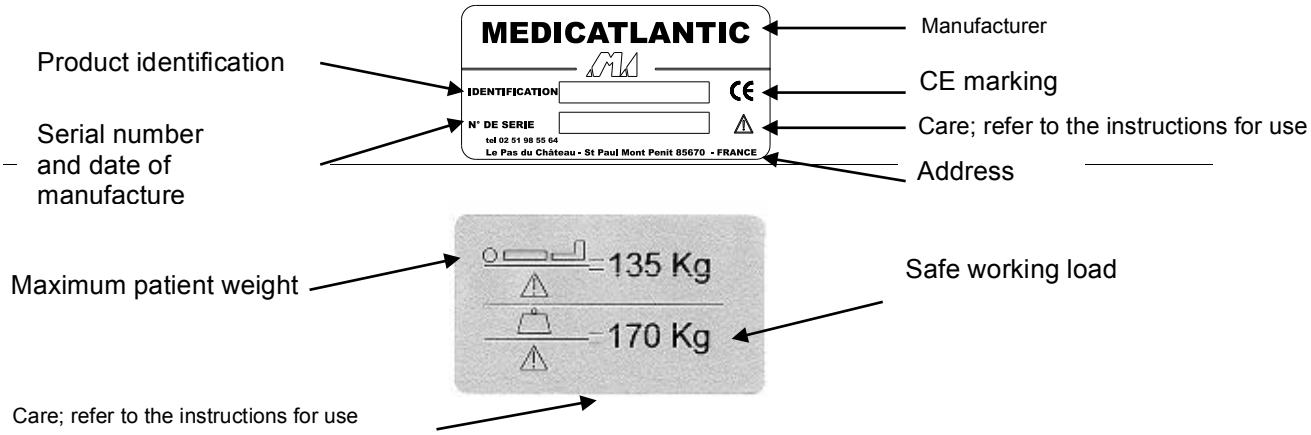
Product for external use, not to be swallowed, store away from heat and avoid contact with the eyes

5. 3 WARRANTIES

- All our manufactured products are covered by our warranty against faulty manufacture, in normal conditions of use and maintenance.
- Labour costs for the replacement of structures or parts under warranty are not covered.
- For the duration of the warranty cover specific to each product, please consult the general sales conditions
- In all correspondence for any maintenance it is essential to include the information on the bed identification label, and those of the electrical parts if they are concerned.
- Replacement is by the supply of original parts within the limit of the warranty period by our dealer network determining the start of the warranty period.

- To ensure the correct application of this warranty and also to avoid invoicing, the return of the faulty parts is essential.

5. 5 IDENTIFICATION



5.6 SERVICE LIFE

- The service life of the bed in normal conditions of use and maintenance is: 5 years

⑥ ***SCRAPPING CONDITIONS***

- The product needs to be scrapped if the essential requirements are no longer respected, especially if the product no longer has its original characteristics and it has not been the subject of a production rework.

- Consequently, it will be necessary to take action so that the product is no longer usable for the function for which it was previously intended.

- When scrapping it is necessary to observe the environmental standards in force

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